

Permit No. Assigned	۸
- Pennii No. Assiune	u .

## Town of Nolensville Temporary Use Application

## (Print all Information)

Name of Applicant/Organization			
Address			
Phone:	Fax:	email:	
Date of Use:	Time:		
Name of Use:			
Location:		A	
Description of Use:			
Will there be a tent? (Yes) (N	No) (circle one).		
If yes, what is the dimensions of th	ne tent?		
The following is the maximum permitted sound levels & times (Zoning Ordinance 8.3.3):			
Adjacent Land Use	7 a.m. to 7 p.m.	7 p.m. to 7 a.m.	
Industrial & Agricultural	75	70	
All Others	65	60	
I hereby certify that the information given herein is true and correct. I the undersigned agree to comply with all ordinances of the Town of Nolensville.			
Signature		Date Control of the C	
APPROVAL			
Signature/Title	D	Date	
Permit Fee Due (if applicable)	\$100.00 (No charge fo	or Non-Profit)	
Receipt No:		Check No:	